ENTRY BLANK PLEASE TYPE OR PRINT Entered previous May Show Ms Mr. Artist ANN M. BOYAJIAN Last Name Last) Permanent 1808 BROOKSHIRE RD. AKRON Address Street 44313 Tel. (2)6 864-8197 Area Code Temporary Address . Street City Tel. () Area Code Zip Permanent address is in what county? SUMMIT Born in Cuyahoga County Yes No Collaborator ___ If entries are not accepted or not sold: Artist will pick up entries at Museum. Museum should dispose of entries. Museum should ship entries to artist C.O.D. at this address:

The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature Amn M. Roysylan

ENTRY BLAI	NKS					
1. Paintings 2. Graphics 3. Photography 4. Sculpture 5. Electric 6. Crafts						
Medium or Material	s					
sttte	HEP	ly and AP	PLI	Què		
Title Oul	LT					
Price or NFS	Insurance Value If NFS Only			x 76" high		
GRAPHICS AND PHOTOGRAPHY ONLY						
Additional No. For Sale Total No. in Edition			Price of Frame			
DO NOT WRITE IN THIS SECTION			AC	CEPTED	REJECTED	
DO NOT WRITE IN THIS SECTION		/_/	X		2000	
		171	FE	EPAID	ВУ	
	'9	('/	3/	122	MAA	
2 □ 1. Paintings □ 2. Graphics □ 3. Photography □ 4. Sculpture □ 5. Electric □ 6. Crafts						
Medium or Materia	ls					
Title						
Price or NFS	Insurance Value If NFS Only		Size			
GRAPHICS AND PHOTOGRAPHY ONLY						
Additional No. For Sale		Total No. in Edition	Price of Frame			
DO NOT WRITE IN		THIS SECTION	AC	CEPTED	REJECTED	
经产品的企业			RE	GEIVED	ВУ	
			1	THE RESERVE AND THE	A STANDARD OF THE PERSON NAMED IN	

1974 MAY SHOW

The Cleveland Museum of Art Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	ANN M. BOYAJIAN
Address	1808 BROOKSHIRE RD.
City & State	AKRON otho Zip 44313

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE
This is your only receipt to claim your object (s). This notification will be mailed to you following judging.
☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts
Medium or Materials
STITCHERY and APPLIQUE
Title QUILT
DO NOT WRITE IN THIS SECTION ACCEPTED REJECTED
.59(T)X
DO NOT DETACH
2 □ 1. Paintings □ 2. Graphics □ 3. Photography □ 4. Sculpture □ 5. Electric □ 6. Crafts
Medium or Materials
Title
DO NOT WRITE IN THIS SECTION ACCEPTED REJECTED